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Facsimile Transmittal

DATE: September 22, 2004

TO: USPTO

ATTN: EXAMINER Emmanuel Bayard

RE: Serial No. 09/971,903

FAX: (703) 872-9306

FROM: Timothy F. Loomis

Number of Pages Sent: 13 (including this transmittal cover sheet)

ATTACHED HERETO IS AN AMENDMINET TRANSMITTAL FORM IN (1) PAGE; AND AN AMENDMENT IN THIRTEEN (13) PAGES. PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (703) 872-9306. Attention Office of Amendments, on:

9/22/04
(Date of Deposit)

Darla D. Kasmedo)
(Name of the Person Making the Deposit)

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Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Customer No.: 23696

Attorney Docket No.: 000063 In Re Application of: Raghu Challa

Serial Number: 09/971,903
Filed: October 4, 2001
Examiner: Emmanuel Bayard
Group Art Unit: 2631

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

Toral* 38 40 0 x \$18 = Independent** 8 8 0 x \$86 = Multiple Dependent Claim(s): Yes No \$290 One Month \$110	CI ADAG	(a) Number Remaining After	(b) Highest Number	(c) Extra		*
Independent** 8 8 0 x \$86 = Multiple Dependent Claim(s): Yes No \$290 One Month \$110 EXTENSION FEES Two Months \$420 Three Months \$950 Total FEE \$110 Total FEE	CLAIMS	Amendment	Previously Paid For	Claims	Large Entity Fee	Fee Paid
Multiple Dependent Claim(s):	Total*	38	40	0	x \$18 =	\$0
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TERMINAL DISCLAIMER Three Months \$110 Three Months \$110 TOTAL FEE TOTAL FEE Total Fee check in the amount of \$ is enclosed to pay for any claim and/or extension fees. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0. The Commissioner is hereby authorized to charge payment of any additional fees which may be req any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, put to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorized to the pattern Department Timothy F. Loomis, Reg. No. 37 DUAL COMM Incorporated See See See See See See See See See S	Multiple Dependent Claim(s):				\$290	\$0
TERMINAL DISCLAIMER *If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column colors of the same in column colors of the same in column colors of the number of the nu			□ O ₁	ne Month	\$110	\$
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Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0. The Commissioner is hereby authorized to charge payment of any additional fees which may be req any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, put to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional auter. 9/22/04 Signature: Timothy F. Loomis, Reg. No. 37 858-845-8355 OUALCOMM Incorporated an Diego, California 92121-1714 elephone: (858) 658-5787 acsimile: (858) 658-2502 CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a)) hereby certify that this correspondence is, on the date shown below, being: MAILING deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Depositor's Name: Depositor's Name: Depositor's Name: Depositor's Name: Depositor's Name: Depositor's Name: Depositor is named additional fees which may be come properly due of patents which may be come properly due or payable, as set forth in the reposition of the patents which may be come properly due or payable, as set forth in the reposition of the patents which may be come properly due or payable, as set forth in the reposition of the payable of the p					TOTAL FEE	\$0
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